

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | S.H. | 1095 | 5-18-01 |
| RESPONSE FORMALITY REVIEW | TAP | 1110 | 6/22/01 |
| | | | 10-0X-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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